No. W 57569		Due no later than Dec 31, 2013		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form 1. Mailing Address: Correct in this box if needed. TAAM MANAGEMENT, LLC TIMOTHY A HENRICKSON 3720 E LEWIS LANE NAMPA ID 83686 USA		2720 5 1 5 14	TIMOTHY A HENRICKSON 3720 E LEWIS LANE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				NAMPA ID	NAMPA ID 83686 3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	TIMOTHY A	HENRICKSON	3720 E LEWIS LANE	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 57569		Signature: Timothy A Henrickson Date: 11/19/2013					3	
		Name (type or		Title: Manager				
Processed 11/19/2013 * Electronically provided signatures are accepted as original signatures.								